

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 05, 2007
Secretary of State

DOCUMENT# N06000012307

Entity Name: TERRACE III AT HERITAGE BAY ASSOCIATION, INC.**Current Principal Place of Business:**10481 SIX MILE CYPRESS PKWY
FT MYERS, FL 33966**New Principal Place of Business:****Current Mailing Address:**10481 SIX MILE CYPRESS PKWY
FT MYERS, FL 33966**New Mailing Address:****FEI Number:** 20-5967655**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SHIELDS, CHRISTOPHER J ESQ.
1833 HENDRY STREET
FORT MYERS, FL 33901 US**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: THRON, DANIEL
Address: 10481 SIX MILE CYPRESS PKWY
City-St-Zip: FT MYERS, FL 33966

Title: D () Delete
Name: SORENSEN, ANDY
Address: 10481 SIX MILE CYPRESS PKWY
City-St-Zip: FT MYERS, FL 33966

Title: D () Delete
Name: HAGEN, JOHN
Address: 10481 SIX MILE CYPRESS PKWY
City-St-Zip: FT MYERS, FL 33966

Title: STD (X) Delete
Name: DISTEPHANO, PAUL
Address: 10481 SIX MILE CYPRESS PKWY
City-St-Zip: FORT MYERS, FL 33966

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SMITH, RUSSELL R
Address: 10481 SIX MILE CYPRESS PKWY
City-St-Zip: FT MYERS, FL 33966

Title: VPD (X) Change () Addition
Name: DEBITETTO, JOHN
Address: 10481 SIX MILE CYPRESS PKWY
City-St-Zip: FT MYERS, FL 33966

Title: STD (X) Change () Addition
Name: BILLUPS, JOHN
Address: 10481 SIX MILE CYPRESS PKWY
City-St-Zip: FT MYERS, FL 33966

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUSSELL R. SMITH

PD

11/05/2007

Electronic Signature of Signing Officer or Director

Date